

## IMPORTANT FACTS FOR FOOD STAMP APPLICANTS

These pages give you important information, including your rights and responsibilities. If you need more information or have questions, ask your worker. The County needs facts about you and your household to see if you are eligible for Food Stamp benefits and to figure how much you will get if you are eligible.

### IF YOU HAVE A DISABILITY AND NEED HELP APPLYING FOR OR CONTINUING TO RECEIVE CASH AID, FOOD STAMP BENEFITS, AND SERVICES, TELL THE COUNTY.

The law says that all applicants/recipients for aid, benefits, or services are to be treated fairly without regard to race, color, national origin, political beliefs, religion, gender, age or disability.

If you think you have been discriminated against, you may file a complaint by:

1. contacting your county's civil rights coordinator; or
2. writing to:
  - California Department of Social Services  
Civil Rights Bureau  
744 P Street MS 15-70,  
P.O. Box 944243, Sacramento, CA 94244-2430
  - or for Food Stamps **only** to:  
U.S. Department of Agriculture,  
Food and Consumer Service, Civil Rights Office,  
550 Kearny Street, San Francisco, CA 94108-2518

You may also file by calling (916) 654-2107 or for the hearing or speech impaired 1-916-654-2098 (TDD).

## YOUR RIGHTS

- To ask for help to complete your application or any other food stamp form.
- To ask for forms and notices to be translated if you don't read English.
- To be treated with courtesy, consideration and respect.
- To be interviewed promptly by the county when you apply and to have your eligibility determined within 30 days.
- To discuss your case with the county and to review your case yourself when you request to do so.
- To be told the rules for getting food stamps right away. If we think you might be eligible, you will get an interview immediately and stamps within three days.
- To ask to have your Food Stamp I.D., authorization document, or issuance card, or food stamps replaced if lost in the mail, damaged, stolen or destroyed. The county will tell you if you are eligible.
- To be given a written notice when your application is approved, denied, or when your benefits change or stop.
- To have your records kept confidential by the county and

state, unless there is an outstanding felony arrest warrant issued for you, or as otherwise provided by law.

- To file a complaint or to ask for a state hearing within 90 days of any action if you think the action was wrong. You can write to your County Welfare Department or call toll free 1-800-952-5253 or for the hearing or speech impaired (TDD) 1-800-952-8349.
- To be represented at a state hearing by yourself or by a household member, friend, attorney, or other person of your choice. NOTE: You may get free legal help at your local legal aid office or welfare rights group.

## YOUR RESPONSIBILITIES

### Citizenship/Immigration Status

You must sign under penalty of perjury that each member applying for food stamps is a U.S. citizen or U.S. national. If you are a noncitizen, you will be expected to provide acceptable verification of your status. Information you give us on immigration status will be checked with the U.S. Immigration and Naturalization Service (INS). Information we get from INS may affect your eligibility for food stamps.

### Social Security Number

You must give us the Social Security Number (SSN) for each household member for food stamps. Anyone who refuses to give either a SSN or proof of application for a SSN will be disqualified from getting benefits. (Providing a SSN is required for all applicants by Section 1137 of the Social Security Act: 7 U.S. Code Section 2025e).

The SSN(s) will be used in a computer match to check income and resources with records from tax, welfare, employment, the Social Security Administration and other agencies. SSN(s) will also be matched with law enforcement agencies. Differences may be checked out with employers, banks or others. Making false statements or failing to report all facts or situations which affect eligibility for food stamps may result in discontinuance and/or repayment of benefits and/or criminal or civil action.

### Verification(s)

You must give verification (proof) or more facts when we ask. If you can't get proof, give the name of some other person or agency we may contact to get it. When you can't get the proof you need, we will help you get it.

### Cooperation

You must cooperate with County, State and Federal staff. You may not get benefits or your benefits may be stopped if you don't cooperate.

# YOUR REPORTING RESPONSIBILITIES

**You must report all changes to the County. If you're not sure how to report changes, what changes to report, or what proof we need, ask your worker. Your worker will tell you if you are a monthly or nonmonthly reporting household.**

## MONTHLY REPORTING

### How You Must Report

You must turn in a complete Monthly Eligibility Report by the 5th day of each month.

### Monthly Reporting Requirements

#### YOU MUST REPORT IF:

- Anyone gets money from work, relatives, Social Security, Veterans benefits, tax refunds, or any other source.
- Anyone gets free rent or utilities.
- Anyone's job or training program changes.
- Anyone's income or source of income changes, starts or stops.
- Any child or any adult starts or stops school, college or training.
- You move in with someone else or anyone moves into or out of your home, including newborns, other children, spouses, absent parents, other relatives and non-relatives.
- Anyone moves to another address, plans to move, or gets a new mailing address. If you move to another county and you want to keep getting benefits, you must tell the county giving you aid and/or benefits AND ask for food stamps again in the new county.
- Anyone gets payments or allowances for job, training or school expenses, such as educational grants and loans, transportation to and from job or training, etc.
- Anyone is self-employed.
- Anyone has job, training or school costs, such as dependent care, transportation, tuition, books, etc.
- Anyone has expenses that are paid for in total or in part by someone else, such as housing, utilities, medical, dependent care, etc.
- Any change in the order for court ordered child support paid by a household member for a child not living in the home.
- Anyone gets, sells, gives away, or transfers real property, such as a house, buildings or land; or personal property, such as money, a bank account, a motor vehicle, a boat, a trust fund, etc.
- Anyone's citizenship/immigration status or documentation changes, or they get a letter, form, or new card from INS.
- Anyone reaches 60 years of age.
- Any member of your household is avoiding or running from the law to avoid a felony prosecution, custody or confinement after conviction, or in violation of probation or parole.
- Any member of your household has committed and been convicted of a drug-related felony for possession, use, or distribution of a controlled substance(s) that took place after August 22, 1996.

#### YOU MAY REPORT IF:

- Any household member, who is disabled or age 60 or over, has changes in medical expenses or any new medical expenses.
- Any household member begins to pay court ordered child support for a child not living in the home.

## NONMONTHLY REPORTING

### How You Must Report

You must report all changes within 10 days:

- by mail, telephone or in person at the County Food Stamp office OR
- on a DFA 377.5, Food Stamp Household Change Report OR
- on a Monthly Eligibility Report if you get cash aid.

### Nonmonthly Reporting Requirements

#### YOU MUST REPORT IF:

- Your total monthly income starts, stops, or changes by more than \$25.
- Anyone's source of income changes.
- You move in with someone else or anyone moves into or out of your home, including newborns, other children, spouses, other relatives or non-relatives.
- Anyone moves to another address, plans to move, or gets a new mailing address.
- The total of your household's stocks, bonds, or other money is more than \$2000 (or \$3000 if you have a household member who is age 60 or over).
- If there is a change in the order of any court ordered child support paid by a member of the household for a child not living in the home.
- Any member of your household is avoiding or running from the law to avoid a felony prosecution, custody or confinement after conviction, or in violation of probation or parole.
- Any member of your household has committed and been convicted of a drug-related felony for possession, use, or distribution of a controlled substance(s) that took place after August 22, 1996.

#### YOU MAY REPORT IF:

- A household member is age 60 or older.
- Any household member, who is disabled or age 60 or over, has changes in medical expenses or any new medical expenses.
- Anyone in the household starts or stops a physical or mental illness.
- You have changes in your dependent care costs.
- Anyone's citizenship/immigration status or documentation changes, or they get a letter, form, or new card from INS.
- Any household member begins to pay court ordered child support for a child not living in the home.

### Budgeting Rules--Monthly Reporting

The amount of food stamps you can get depends on your income and allowable expenses. What you report on the Monthly Eligibility Report will be used to figure the amount of food stamps you can get two months later. For example, your income and allowable expenses from January are used to figure the food stamp benefits you would get in March. This method is called retrospective budgeting.

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## WORK AND TRAINING RULES

- **Register for Work:** Most household members between the ages of 18 and 60 who are able to work must register for work. Some 16 and 17 year old household members may need to register. A single parent with a child(ren) under six does not have to register. You may be excused for other reasons that your county worker can explain. Once you or a member of your household are registered for work, you must follow food stamp work rules or your application may be denied, or your food stamps can be stopped for at least one, three or six months depending on how often this has happened. Work rules include keeping appointments, taking an acceptable job, not changing the hours you work to less than 30 hours per week, not quitting a job, and participating in an employment or training assignment we send you to.
- **Work requirement for Able-Bodied Adults:** There is a work rule which you may need to meet if you are an able-bodied adult without minor children. If you are under age 18 or over age 50 or pregnant, you do not have to meet this work rule. You may be excused for other reasons that your county worker can explain. The work rule says that if you are an able-bodied adult, you must work at least 20 hours a week in paid employment, participate (take part) in a workfare project for the required number of hours, or participate in an approved training activity for at least 20 hours per week. During a period of 36 months, food stamps will stop if there are three months in which you do not meet the work rule, unless you are excused. If food stamps stop because you did not meet the work rule, you can get food stamps again after you have worked or participated in a workfare or training assignment, or if you get excused from the work rule. If you stop meeting the work rule a second time in the 36-month period you may be able to get food stamps for three months in a row without meeting the rule in some cases. After that you can only get food stamps if you meet the work rule or get excused.

### **Work Requirements for California Food Assistance Program Recipients:**

To get food stamps under the California Food Assistance Program (CFAP), there is a work rule you may need to meet. Your CFAP may be denied or stopped if you don't meet this rule. If you receive California Work Opportunity and Responsibility to Kids (CalWORKs), you must meet welfare-to-work rules to be eligible for CFAP. You may be excused from meeting CalWORKs welfare-to-work and CFAP work rules for reasons that your county worker can explain.

If you do not receive CalWORKs, you must work in subsidized or unsubsidized employment for the same number of hours that your county requires CalWORKs recipients to participate in welfare-to-work activities. You may be excused from the CFAP work rule if you are disabled, sixty years of age or older, a child under 16 years of age, or you meet the welfare-to-work exemption for full-time high school students. If you are a migrant or seasonal farm worker you can also be excused if you receive unemployment cash payments or your county decides that there is not enough of the right kind of farm work available.

### **STANDARD UTILITY ALLOWANCE (SUA)**

If you are billed for heating and/or cooling costs that are not included in your rent or mortgage payment, you may be eligible for the Standard Utility Allowance (SUA). The SUA is one deduction for all of your eligible utility costs. If your utility bills are more than the SUA, you may switch between actual and the SUA at recertification. If you have other utility costs but your heating or cooling costs are included in your rent, your benefits will be figured on your actual utility costs. Ask the County to check your facts to see if you are eligible for the SUA.

## DISQUALIFICATION PENALTIES

Failing to follow the rules listed can result in a finding of a Food Stamp Intentional Program Violation (IPV). The penalties for an IPV are **disqualification** as listed below **AND** can be **fines up to \$250,000 and/or jail/prison for up to 20 years**. Disqualification means not being able to get food stamps for a period of time. When you are disqualified, the penalties stop your benefits for:

- **12 months for the first violation**
- **24 months for the second violation, and**
- **forever for the third violation.**

These penalties start after a state hearing or court of law finds that an individual committed an IPV.

In addition there are **separate penalties** for other things you should not do. They are:

- **If you are found guilty in any court of law of trading food coupons for controlled substances, food stamps can be stopped for 24 months for the first violation and forever for the second violation.**
- **If you are found guilty in any court of law of trading food stamps coupons for firearms, ammunition or explosives, food stamps can be stopped forever for the first violation.**
- **If you sell or trade food stamps worth \$500 or more food stamps can be stopped forever.**
- **If you file more than one application at the same time and give false identification or residence information, food stamps can be stopped for ten years.**

Also, anyone who is accused of committing an IPV may agree to be disqualified by signing either a Disqualification Consent Agreement or an Administrative Disqualification Hearing Waiver. Anyone who signs one of these documents accepts responsibility to repay any overissuance.

## PENALTY WARNING

If you don't report all facts or give wrong facts to get or keep getting benefits, you can be legally prosecuted with penalties of a fine and/or imprisonment. You may be found to have committed a felony if more than \$400 is wrongly paid out in food stamp benefits because you didn't report all of your facts or changes in income, property or family status.

If your household receives food stamps, you must follow these rules:

- Don't give wrong or incomplete facts to get or keep getting food stamps.
- Don't trade or sell food stamps, Food Stamp Authorization Documents (ADs), or issuance cards.
- Don't alter ADs or issuance cards to get food stamps you are not entitled to get.
- Don't use food stamps to buy ineligible items such as alcoholic drinks or tobacco, paper or cleaning products.
- Don't use someone else's food stamps, ADs or issuance cards for your household.

## CERTIFICATION

I certify that I have received a copy of the "Important Facts for Food Stamp Applicants" (DFA 285-A3). I understand my rights and responsibilities. I agree to comply with my responsibilities. I also understand the penalties for giving wrong or incomplete facts and failing to report facts or situations which may affect my eligibility or benefit level for food stamp benefits.

SIGNATURE (ADULT HOUSEHOLD MEMBER OR AUTHORIZED REPRESENTATIVE):

DATE:

WITNESS, IF YOU SIGNED WITH AN "X"

DATE:

I certify that I have informed the applicant/recipient of the above responsibilities and of the possibilities of criminal penalties for intentionally making false statements or failing to report information which affects food stamp eligibility.

SIGNATURE OF INTERVIEWING WORKER

DATE APPLICATION REVIEWED WITH CLIENT OR AUTHORIZED REPRESENTATIVE: